

Template of Measure Attributes

Attribute	Description of Attribute	Type
Title	Identifies the title of the measure.	Text field
Source(s)	Identifies the complete bibliographic source(s) for the measure as disseminated by the measure submitter(s).	Citation field
Measure Domain		
Primary Measure Domain	Classifies the major focus of the measure by one of the domains of care.	Choose one: <ul style="list-style-type: none"> • Unspecified • Access • Outcome • Patient Experience • Population Health • Process • Structure • Use of Services
Secondary Measure Domain	Identifies the secondary focus of the measure by domain of care (if applicable). <i>Does not apply to Use of Services measures.</i>	Choose all that apply: <ul style="list-style-type: none"> • Does not apply to this measure • Access • Outcome • Patient Experience • Process • Structure
Brief Abstract		
Description	Provides a concise statement of the specific aspects of health care, the patient population, providers, setting(s) of care, and time period that the measure addresses.	Text field
Rationale	Identifies the rationale that briefly explains the importance of the measure (i.e., why it is used).	Text field

Attribute	Description of Attribute	Type
Primary Clinical Component	Identifies the clinical aspect to which the measure refers, such as a structural feature, a clinical condition, a clinical process, a health outcome, and/or a patient characteristic. A combination of components may be identified (e.g., colorectal cancer; screening)	Text field
Denominator Description	Provides the <i>general</i> specifications of any clinical component that is the basis for inclusions and exclusions in the denominator. <i>Does not apply to Structure measures; for Structure measures, the denominator contains a single entity (e.g., a hospital or healthcare professional).</i>	Text field
Numerator Description	Provides the <i>general</i> specifications of any clinical component that is the basis for inclusions and exclusions in the numerator. This field will be used to further describe the metric (if necessary).	Text field

Attribute	Description of Attribute	Type
Evidence Supporting the Measure		
Evidence Supporting the Criterion of Quality	<p>Describes the type(s) of supporting evidence appropriate for the measure domain.</p> <p>For Access measures, evidence that an association exists between the result of the access measure and the outcomes of, or satisfaction with, care.</p> <p>For Outcome measures, evidence that the outcome measure has been used to detect the impact of one or more clinical interventions.</p> <p>For Patient Experience measures, evidence that an association exists between the measure of patient experience of health care and the values and preferences of individuals/the public.</p> <p>For Process measures, evidence that the measured clinical process has led to improved health outcomes.</p> <p>For Structure measures, evidence that an association exists between the structure measure and one of the four other domains of quality (e.g., Access, Outcome, Patient Experience, and Process).</p> <p>Type of evidence may include published peer-reviewed studies, systematic reviews, clinical practice guidelines, formal consensus procedures involving experts in relevant clinical, methodological, and organizational sciences. For Patient Experience measures, evidence should include focus groups involving patients and/or cognitive testing of the measure by patients. For Access and Structure measures, the consensus panel should also include other relevant stakeholders.</p> <p><i>Does not apply to Use of Services and Population Health measures.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence • A formal consensus procedure, involving experts in relevant clinical, methodological, and organizational sciences • A systematic review of the clinical literature (e.g., Cochrane Review) • Focus groups • One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Attribute	Description of Attribute	Type
Evidence Supporting the Value of Monitoring the Aspect of Population Health	<p>Describes the supporting evidence if provided for Population Health measures.</p> <p><i>Does not apply to Access, Outcome, Patient Experience, Process, Structure, and Use of Services measures.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • No evidence is provided • A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence • A formal consensus procedure, involving experts in relevant clinical, methodological, and organizational sciences • A systematic review of the clinical literature (e.g., Cochrane Review) • One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal
Evidence Supporting the Value of Monitoring Use of Service	<p>Describes the supporting evidence if provided for Use of Services measures.</p> <p><i>Does not apply to Access, Outcome, Patient Experience, Population Health, Process, and Structure measures.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • No evidence is provided • A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence • A formal consensus procedure, involving experts in relevant clinical, methodological, and organizational sciences • A systematic review of the clinical literature (e.g., Cochrane Review) • One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal
National Guideline Clearinghouse Link	Identifies link(s) to guideline summary(s) in the National Guideline Clearinghouse where the measure was developed from an evidence-based guideline.	Hyperlink
Evidence Supporting Need for the Measure		
Need for the Measure	<p>Describes the type(s) of evidence that supports the need for the measure (i.e., why this measure was selected by the submitter).</p> <p>Type of evidence includes evidence of (a) variation in quality, (b) overall poor quality, and (c) any use of the measure to improve performance.</p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • Overall poor quality for the performance measured • Use of this measure to improve performance • Variation in quality for the performance measured

Attribute	Description of Attribute	Type
	For Structure measures, type of evidence includes evidence of a) variation in capacity, b) overall insufficient capacity, and c) any use of the measure to increase capacity.	Choose all that apply: <ul style="list-style-type: none"> • Unspecified • Overall insufficient capacity • Use of this measure to increase capacity • Variation in capacity
	For Use of Services measures	Choose all that apply: <ul style="list-style-type: none"> • Unspecified • Monitoring and planning • Variation in use of service
	For Population Health measures	Choose all that apply: <ul style="list-style-type: none"> • Unspecified • Monitoring health state(s) • Variation in health state(s)
Evidence Supporting Need for the Measure	Identifies references that support the assertions made regarding the need for the measure.	Citation field
State of Use of the Measure		
State of Use	Identifies the status of the measure regarding its use within the past three years by health care organizations. Measure use can encompass current routine use, pilot testing, or still in use by organizations/entities although discontinued by the measure developer.	Choose one: <ul style="list-style-type: none"> • Unspecified • Current routine use • Pilot testing • Used, but developer discontinued

Attribute	Description of Attribute	Type
Current Use	<p>Classifies the current use(s) of the measure by quality initiative and constituency.</p> <p><i>The values “Internal quality improvement,” “Collaborative inter-organizational quality improvement,” “Quality of care research,” “Decision-making by business about health-plan purchasing,” “Decision-making by consumers about health plan/provider choice,” and “Decision-making by health plans about provider contracting” may not be selected for Use of Services and Population Health measures.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • Accreditation • Collaborative inter-organizational quality improvement • Decision-making by businesses about health-plan purchasing • Decision-making by consumers about health plan/provider choice • Decision-making by health plans about provider contracting • Decision-making by managers about resource allocation • External oversight/Department of Defense/TRICARE • External oversight/Indian Health Service • External oversight/Maternal and Child Health Bureau • External oversight/Medicaid • External oversight/Medicare • External oversight/Prison health care systems • External oversight/Regional, county, or city agencies • External oversight/State government program • External oversight/Veterans Health Administration • Federal health policymaking • Internal quality improvement • Monitoring and planning • Monitoring health state(s) • National reporting • Pay-for-performance • Quality of care research • State health policymaking

Attribute	Description of Attribute	Type
Application of the Measure in its Current Use		
Care Setting	Classifies the settings for which the measure applies.	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • Ambulatory Care • Ancillary Services • Behavioral Health Care • Community Health Care • Emergency Medical Services • Home Care • Hospices • Hospitals • Long-term Care Facilities • Managed Care Plans • Physician Group Practices/Clinics • Rehabilitation Centers • Residential Care Facilities • Rural Health Care • Substance Use Treatment Programs/Centers

Attribute	Description of Attribute	Type
<p>Professionals Responsible for Health Care</p>	<p>Classifies the professional(s) who is/are responsible for health care.</p> <p><i>For all area health indicators, the value "Public Health Professionals" must be selected.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • Advanced Practice Nurses • Allied Health Personnel • Chiropractors • Clinical Laboratory Personnel • Dentists • Dietitians • Emergency Medical Technicians/Paramedics • Measure is not provider specific • Nurses • Occupational Therapists • Pharmacists • Physical Therapists • Physician Assistants • Physicians • Podiatrists • Psychologists/Non-physician behavioral Health Clinicians • Public Health Professionals • Respiratory Care Practitioners • Social Workers • Speech-language Pathologists
<p>Lowest Level of Health Care Delivery Addressed</p>	<p>Classifies the most discrete level of health care delivery to which the measure (in its current use) applies.</p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • National • Regional • States • Counties or Cities • Metropolitan Statistical Areas/Health Services Areas • Multisite Health Care Organizations • Single Health Care Delivery Organizations • Group Clinical Practices • Individual Clinicians

Attribute	Description of Attribute	Type
Target Population Age	Describes the age range for the population measured. <i>Does not apply to Structure measures.</i>	Text field
Target Population Gender	Classifies the target population by gender. <i>Does not apply to Structure measures.</i>	Choose one: <ul style="list-style-type: none"> • Does not apply to this measure • Either male or female • Female only • Male only
Stratification by Vulnerable Populations [INDEXED]	Classifies the populations vulnerable to health care quality problems that are separately identified for sampling.	Choose all that apply: <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Children • Disabled • Frail Elderly • Homeless • Illiterate/Low-literate Populations • Immigrants • Medically Uninsured • Mentally Ill • Minority Groups • Non-English Speaking Populations • Poverty Populations • Prisoners • Rural Populations • Terminally Ill • Transients/Migrants • Urban Populations • Women
Stratification by Vulnerable Populations	Describes the populations vulnerable to health care quality problems that are separately identified for sampling. <i>Does not apply to Structure measures.</i>	Text field

Attribute	Description of Attribute	Type
Characteristics of the Primary Clinical Component		
Incidence/ Prevalence	Describes the occurrence in a population of the disease or condition or the structural feature associated with the primary clinical component.	Text field
Evidence for Incidence/ Prevalence	Identifies references documenting information provided in the Incidence/Prevalence field.	Citation field
Association with Vulnerable Populations	Describes the association of the primary clinical component within a population vulnerable to health care quality problems.	Text field
Evidence for Association with Vulnerable Populations	Identifies references documenting information provided in the Association with Vulnerable Populations field.	Citation field
Burden of Illness	Describes the time course and amount of disability associated with the primary clinical component.	Text field
Evidence for Burden of Illness	Identifies references documenting information provided in the Burden of Illness field.	Citation field
Utilization	Describes the utilization of resources due to the primary clinical component that may include hospital days, admissions/discharges, ambulatory care visits, tests, and procedures.	Text field
Evidence for Utilization	Identifies references documenting information provided in the Utilization field.	Citation field
Costs	Describes the costs associated with the primary clinical component that may include per diem costs, or the cost of ambulatory care visits, tests, and procedures. In cases where costs for these items are not known, but charges are, charges are used as a proxy for cost.	Text field

Attribute	Description of Attribute	Type
Evidence for Costs	Identifies references documenting information provided in the Costs field.	Citation field
Institute of Medicine National Health Care Quality Report Card Categories		
IOM Care Need	<p>Classifies the measure into one of four Institute of Medicine (IOM) care need classifications where applicable.</p> <p><i>Structure and Use of Services measures will always have the value "Not within an IOM Care Need."</i></p> <p><i>For Population Health measures, IOM Care Need not assigned unless developer selects a domain.</i></p>	<p>Choose all that apply to the primary clinical component:</p> <ul style="list-style-type: none"> • Unspecified • Not within an IOM Care Need • End of Life Care • Getting Better • Living with Illness • Staying Healthy
IOM Domain	<p>Classifies the measure into one or more of the Institute of Medicine (IOM) domains where applicable.</p> <p><i>Structure and Use of Services measures will always have the value "Not within an IOM Domain."</i></p> <p><i>The IOM Domain "Efficiency" can only be selected in conjunction with one of the other IOM Domains.</i></p> <p><i>For Population Health measures, IOM Care Need not assigned unless developer selects a domain.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • Not within an IOM Domain • Effectiveness • Efficiency • Equity • Patient-centeredness • Safety • Timeliness

Attribute	Description of Attribute	Type
Data Collection for the Measure		
Case Finding	<p>Characterizes patients eligible for inclusion in the measure as users and/or nonusers of care.</p> <p><i>Does not apply to Structure measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Both users and nonusers of care • Users of care only
Description of Case Finding	<p>Describes the procedure for determining whether a case is <i>potentially</i> eligible for inclusion in the denominator of a measure. Case finding establishes a sampling frame from which a more highly specified selection of cases will be made.</p> <p><i>Does not apply to Structure measures.</i></p>	Text field
Denominator Sampling Frame	<p>Classifies the cases <i>potentially</i> eligible for inclusion in the denominator, from which a more highly specified selection of cases will be made.</p> <p><i>Does not apply to Structure measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Enrollees or beneficiaries • Geographically defined • Organizationally defined • Patients associated with provider
Denominator Inclusions/Exclusions	<p>Describes the specific inclusion and exclusion criteria used to refine the denominator.</p>	Text field
Relationship of Denominator to Numerator	<p>Designates whether all cases in the denominator are equally eligible to appear in the numerator.</p> <p><i>Does not apply to Structure measures.</i></p> <p><i>Only the value “All cases in the denominator are not equally eligible to appear in the numerator” can be selected for Population Health measures.</i></p> <p><i>The value “Unspecified” cannot be selected for Access, Outcome, Patient Experience, Process, or Structure measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • All cases in the denominator are equally eligible to appear in the numerator • All cases in the denominator are <i>not</i> equally eligible to appear in the numerator

Attribute	Description of Attribute	Type
Denominator (Index) Event	<p>Identifies the event or state that defines a patient as eligible for inclusion in the denominator.</p> <p><i>Does not apply to Structure measures.</i></p>	<p>Choose all that apply:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Clinical Condition • Diagnostic Evaluation • Encounter • Institutionalization • Patient Characteristic • Provider Characteristic • Therapeutic Intervention
Denominator Time Window	<p>Classifies the time period (in association with the denominator [index] event) in which patients are reviewed for inclusion in the denominator.</p> <p><i>Does not apply to Structure measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Time window brackets index event • Time window follows index event • Time window is a fixed period of time • Time window is a single point in time • Time window precedes index event
Numerator Inclusions/Exclusions	<p>Describes the specific inclusion and exclusion criteria used to refine the numerator.</p> <p>This field will be used to further describe the metric (if necessary).</p>	Text field
Measure Results Under Control of Health Care Professionals, Organizations, and/or Policymakers	<p>Designates whether measure results are somewhat or substantially under the control of the health care professionals, organizations and policymakers to whom the measure applies.</p> <p><i>The value "Unspecified" cannot be selected for Access, Outcome, Patient Experience, Process, or Structure measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies. • The measure results are <i>not</i> under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

Attribute	Description of Attribute	Type
Numerator Time Window	Identifies the time period in which patients are reviewed for inclusion in the numerator.	Choose one: <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Encounter or point in time • Episode of care • Fixed time period • Institutionalization
Data Source	Identifies the data source(s) necessary to implement the measure.	Choose all that apply: <ul style="list-style-type: none"> • Unspecified • Administrative and laboratory data • Administrative and medical records data • Administrative and pharmacy data • Administrative and provider data • Administrative data • Administrative data and clinician survey • Administrative data and patient survey • Clinician survey • Laboratory data • Medical record • National public health data • Patient survey • Pharmacy data • Provider data • Registry data • Special or unique data • State public health data
	For Structure measures, the following are possible data sources:	<ul style="list-style-type: none"> • Administrative data • Clinician survey • National public health data • Provider data • Special or unique data • State public health data

Attribute	Description of Attribute	Type
Level of Determination of Quality	<p>Identifies the level at which quality can be assessed, i.e., at the individual patient level or the aggregate patient level.</p> <p><i>Does not apply to Structure, Population Health, and Use of Services measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Does not apply to this measure • Individual Case • Not Individual Case
Outcome Type	<p>Classifies the type of outcome for Outcome measures.</p> <p><i>Applies only when "Outcome" is selected as a Primary or Secondary Measure Domain.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Adverse Outcome • Clinical Outcome • Functional Status • Health Risk State or Behavior • Proxy for Outcome • Quality of Life Measure
Type of Health State	<p>Classifies the type of health state for Population Health measures.</p> <p><i>Applies only to Population Health measures.</i></p>	<p>Choose one:</p> <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • Adverse Health State • Functional Status • Health Risk State or Behavior • Health State not otherwise specified

Attribute	Description of Attribute	Type
Pre-existing Instrument Used	Identifies all pre-existing instruments, such as a standardized survey instrument, used in implementing the measure.	Text field
Computation of the Measure		
Scoring	Identifies the method used to score the measure.	Choose one: <ul style="list-style-type: none"> • Unspecified • Categorical Variable • Continuous Variable • Count • Frequency Distribution • Non-weighted Score/Composite/Scale • Rate • Ratio • Weighted Score/Composite/Scale

Attribute	Description of Attribute	Type
Interpretation of Score	Classifies interpretation of score according to whether better quality is associated with a higher score, a lower score, a score falling within a defined interval, or a passing score. Applies to Process, Outcome, Access, Experience, and Structure measures.	Choose one: <ul style="list-style-type: none"> Better quality is associated with a higher score Better quality is associated with a lower score Better quality is associated with a score falling within a defined interval Passing score defines better quality
	Applies to Population Health measures.	Choose one: <ul style="list-style-type: none"> Unspecified A higher score is desirable A lower score is desirable A score falling within a defined interval is desirable
	Applies to all Use of Services measures.	<ul style="list-style-type: none"> Undetermined
Allowance for Patient Factors	Identifies the type of analytic considerations made for the measure based on patient factors or characteristics. <i>Does not apply to Structure measures.</i>	Choose all that apply: <ul style="list-style-type: none"> Unspecified Does not apply to this measure Analysis by high-risk subgroup (stratification on vulnerable populations) Analysis by subgroup (stratification on patient factors, geographic factors, etc.) Case-mix adjustment Paired data at patient level Risk adjustment devised specifically for this measure/condition Risk adjustment method widely or commercially available
Description of Allowance for Patient Factors	Describes the analytic considerations made for the measure based on the patient factors and characteristics. <i>This field will not display if either "Unspecified" or "Does not apply to this measure" is selected in the "Allowance for Patient Factors" field.</i>	Text field

Attribute	Description of Attribute	Type
Standard of Comparison	Classifies the type and time frame of the comparison according to whether the comparison is external (at a given point-in-time or of a time trend), internal or to a prescriptive standard. <i>The specific nature of the "prescriptive standard" (e.g., "pass/fail") will be described in the corresponding text field.</i>	Choose all that apply: <ul style="list-style-type: none"> • Unspecified • Does not apply to this measure • External comparison at a point in time • External comparison of time trends • Internal time comparison • Prescriptive standard
Prescriptive Standard	Describes the prescriptive standard(s) used for comparison of measure results.	Text field
Evidence for Prescriptive Standard	Identifies references documenting information provided in the Prescriptive Standard field. <i>Does not apply to Use of Services and Population Health measures.</i>	Citation field
Evaluation of Measure Properties		
Extent of Measure Testing	Describes the extent of testing of the measure including reliability and/or validity testing.	Text field
Evidence for Reliability/ Validity Testing	Identifies references documenting reliability/validity testing as described in the Extent of Measure Testing field.	Citation field
Identifying Information		
Original Title	Identifies the original name of the measure as stated in the original measure documentation.	Text field
Measure Collection Name	Identifies the name of the collection of measures to which the measure belongs (if applicable).	Text field
Measure Set Name	Identifies the name of the measure set to which the measure belongs (if applicable).	Text field
Measure Subset Name	Identifies the name of the subset to which the measure belongs (if applicable).	Text field
Composite Measure Name	Identifies the name of the composite measure to which the measure belongs (if applicable).	Text field

Attribute	Description of Attribute	Type
Submitter	Identifies the organization(s) that submitted the measure to NQMC.	Text field
Developer	Identifies the organization(s) that developed the measure.	Text field
Endorser	Identifies the organization(s) that have endorsed the measure (e.g., NQF) This field will not display if Not applicable.	Text field
Included In	Identifies the inclusion of a measure in specified measure initiatives.	Choose all that apply: <ul style="list-style-type: none"> • Ambulatory Care Quality Alliance • Home Health Compare • Hospital Compare • Hospital Quality Alliance • National Healthcare Quality Report (NHQR) • National Healthcare Disparities Report (NHDR) • Nursing Home Compare • Physician Quality Reporting Initiative
Adaptation	Identifies that the measure has been adapted from another measure(s).	Text field
Parent Measure	Identifies the name(s) of all the measures from which the current measure was adapted. The name of each “parent” measure’s developer follows in parentheses.	Text field
Release Date	Identifies the date that the measure was first released by the submitting organization (this could be the date first issued or published).	Date field
Revision Date	Identifies the date of the most recent revision to the measure and/or the documentation by the submitting organization (if applicable).	Date field
Measure Status	Identifies whether the measure is the current release or an update.	Text field
Source(s)	Identifies the complete bibliographic source(s) for the measure as disseminated by the measure submitter(s).	Citation field

Attribute	Description of Attribute	Type
Measure Availability	Identifies contact information for requesting the measure documentation. Where possible, information regarding electronic (including hypertext links to the full-text) and print copies is provided.	Text field
Companion Documents	Identifies companion documents that are relevant to the measure. These companion documents are not necessarily available within NQMC.	Text field
NQMC Status	Identifies when the measure was completed or revised by ECRI, and verified by the submitting organization(s).	Text field
Copyright Statement	Provides the copyright statement of the organization that submitted the measure.	Text field